

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 10
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER ▼ C C00524454	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY 02 / 13 / 2016	

Full Name of Payee INFOCISION MANAGEMENT CORP		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 325 SPRINGSIDE DR		Amount 1721.93	
City AKRON	State OH	Zip Code 44333	Transaction ID : SE.48348
Purpose of Expenditure VOTER CONTACT CALLS OVER THE NEXT TWO WEEKS		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 09 / 2014
Name of Federal Candidate MARK BEGICH		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		2213.91	

Full Name of Payee INFOCISION MANAGEMENT CORP		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 325 SPRINGSIDE DR		Amount 7081.34	
City AKRON	State OH	Zip Code 44333	Transaction ID : SE.48349
Purpose of Expenditure VOTER CONTACT CALLS OVER THE NEXT TWO WEEKS		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 09 / 2014
Name of Federal Candidate MARK L PRYOR		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		9104.58	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	8803.27
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

MM / DD / YYYY
02 / 13 / 2016

Signature